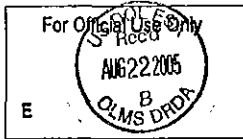


# FORM LM-30

## LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.



READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

1. File Number U - <u>15096</u>	2. Fiscal Year Covered From: <u>1</u> / <u>1</u> / <u>2004</u> Through: <u>12</u> / <u>31</u> / <u>2004</u>
3. Name and address of person filing. Name <u>Vernon Wells</u> P.O. Box, Bldg., Room No., if any <u>% Legacy Sports</u> Street <u>500 Newport Center Dr #800</u> City <u>Newport Beach</u> State <u>CA</u> ZIP Code + 4 <u>92660</u>	4. Name, file number, and address of labor organization. Name <u>Major League Baseball Players Assoc.</u> Labor Organization File Number <u>064 727</u> P.O. Box, Building and Room Number, if any Street <u>12 East 49th Street</u> City <u>New York</u> State <u>NY</u> ZIP Code + 4 <u>10017</u>
5. Position in labor organization. <u>Player Representative</u>	

Enter appropriate data below if, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions):

A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.	
6. Name and address of Employer (including trade name, if any). Name Trade Name, if any: P.O. Box, Bldg., Room No., if any Street City State ZIP Code + 4	7.a. Nature of Interest, Transaction, or Income.  7.b. Amount.

Signature

15. Signature and verification. The undersigned declares, under penalty of Perjury and other applicable penalties of the law, that all of the information submitted in this report (including the information contained in any accompanying documents), has been examined by the signatory and is, to the best of the undersigned's knowledge and belief, true, correct, and complete. (See the section on penalties in the instructions.)		
Signed <u>[Signature]</u>	On <u>8/15/05</u> Date	<u>(817) 749-0047</u> Telephone Number

Name of Person Filing <b>Vernon Wells</b>	File Number <b>U-</b>
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**B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.**

<b>8. Name and address of Business (including trade name, if any).</b>  Name <b>Fleer Trading Cards</b>  Trade Name, if any:  P.O. Box, Bldg., Room No., if any <b>Suite 300</b>  Street <b>1120 Route 73</b>  City <b>Mt. Laurel</b>  State <b>NJ</b> ZIP Code + 4 <b>08054</b>	<b>9. Business deals with:</b>  <input checked="" type="checkbox"/> a. Labor Organization <input type="checkbox"/> b. Trust <input type="checkbox"/> c. Employer
<b>10. If 9.b. or 9.c. is checked give trust or employer's name.</b>  Name  Trade Name, if any:  P.O. Box, Bldg., Room No., if any  Street  City  State  ZIP Code + 4	<b>11.a. Nature of such dealing.</b> <div style="border: 1px solid black; padding: 5px; min-height: 80px;"> <b>MLBPA Licensee</b> </div> <b>11.b. Approximate dollar value of such dealing.</b> <b>15,000</b>  <b>12.a. Nature of interest held or income received.</b> <div style="border: 1px solid black; padding: 5px; min-height: 80px;"> <b>Autographs on baseball cards</b> </div> <b>12.b. Amount.</b> <b>12,120</b>

<b>C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.</b>	
<b>13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).</b>  Name  Trade Name, if any:  P.O. Box, Bldg., Room No., if any  Street  City  State  ZIP Code + 4	<b>14.a. Nature of payment.</b>  <div style="border: 1px solid black; height: 100px;"></div>
<b>13.b. Is the Business an Employer</b> <b>or Consultant</b> <b>?</b>	<b>14.b. Amount of payment.</b>



Name of Person Filing <b>Vernon Wells</b>	File Number <b>U-</b>
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**B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.**

<p><b>8. Name and address of Business (including trade name, if any).</b></p> <p>Name <b>Donruss</b></p> <p>Trade Name, if any: _____</p> <p>P.O. Box, Bldg., Room No., if any: _____</p> <p>Street <b>2300 E. Randol Mill Rd.</b></p> <p>City <b>Arlington</b></p> <p>State <b>TX</b> ZIP Code + 4 <b>76011</b></p>	<p><b>9. Business deals with:</b></p> <p><input checked="" type="checkbox"/> a. Labor Organization</p> <p><input type="checkbox"/> b. Trust</p> <p><input type="checkbox"/> c. Employer</p>
<p><b>10. If 9.b. or 9.c. is checked give trust or employer's name.</b></p> <p>Name: _____</p> <p>Trade Name, if any: _____</p> <p>P.O. Box, Bldg., Room No., if any: _____</p> <p>Street: _____</p> <p>City: _____</p> <p>State: _____ ZIP Code + 4: _____</p>	<p><b>11.a. Nature of such dealing.</b></p> <p><b>MLBPA Licensee</b></p> <hr/> <p><b>11.b. Approximate dollar value of such dealing.</b> <b>5,750,370</b></p> <p><b>12.a. Nature of interest held or income received.</b></p> <p><b>Autographs on baseball cards</b></p> <hr/> <p><b>12.b. Amount.</b> <b>25,000</b></p>

<p><b>C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.</b></p>	
<p><b>13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).</b></p> <p>Name: _____</p> <p>Trade Name, if any: _____</p> <p>P.O. Box, Bldg., Room No., if any: _____</p> <p>Street: _____</p> <p>City: _____</p> <p>State: _____ ZIP Code + 4: _____</p>	<p><b>14.a. Nature of payment.</b></p> <p>_____</p>
<p><b>13.b. Is the Business an Employer</b> _____ <b>or Consultant</b> _____ <b>?</b></p>	<p><b>14.b. Amount of payment.</b></p> <p>_____</p>

Name of Person Filing <u>Vernon Wells</u>	File Number <u>U-</u>
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B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

<p>8. Name and address of Business (including trade name, if any).</p> <p>Name <u>Topps</u></p> <p>Trade Name, if any: _____</p> <p>P.O. Box, Bldg., Room No., if any: _____</p> <p>Street <u>1 Whitehall Street</u></p> <p>City <u>New York</u></p> <p>State <u>NY</u> ZIP Code + 4 <u>10004</u></p>	<p>9. Business deals with:</p> <p><input checked="" type="checkbox"/> a. Labor Organization</p> <p><input type="checkbox"/> b. Trust</p> <p><input type="checkbox"/> c. Employer</p>
<p>10. If 9.b. or 9.c. is checked give trust or employer's name.</p> <p>Name _____</p> <p>Trade Name, if any: _____</p> <p>P.O. Box, Bldg., Room No., if any: _____</p> <p>Street _____</p> <p>City _____</p> <p>State _____ ZIP Code + 4 _____</p>	<p>11.a. Nature of such dealing.</p> <p><u>MLBPA Licensee</u></p> <hr/> <p>11.b. Approximate dollar value of such dealing. <u>4,832,269</u></p> <p>12.a. Nature of interest held or income received.</p> <p>_____</p> <hr/> <p>12.b. Amount. <u>30,000</u></p>

C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.

<p>13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).</p> <p>Name _____</p> <p>Trade Name, if any: _____</p> <p>P.O. Box, Bldg., Room No., if any: _____</p> <p>Street _____</p> <p>City _____</p> <p>State _____ ZIP Code + 4 _____</p>	<p>14.a. Nature of payment.</p> <p>_____</p>
<p>13.b. Is the Business an Employer _____ or Consultant _____ ?</p>	<p>14.b. Amount of payment.</p> <p>_____</p>

Vernon Wells

FORM LM-30

LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT - ADDENDUM to PART B

In 2004, I received endorsement income from two (2) businesses that, insofar as I know, do not do business with the MLBPA, but that may do business with one or more Major League Baseball Clubs and / or Major League Baseball. I do not know whether any of these businesses have such extensive commercial dealings with the Clubs and / or with Major League Baseball that those commercial dealings represent a "substantial part" of their overall business operations. Accordingly, in a good faith effort to fully meet (and perhaps go beyond) my reporting obligation, I am stating below the amount of endorsement income I received from each of these businesses in 2004:

<u>Name and address of Business</u>	<u>Amount</u>
adidas 5055 N. Greeley Ave Portland, OR 97217	\$ 10,000
adidas 5055 N. Greeley Ave Portland, OR 97217	\$ 3,333 (merchandise)
Rawlings PO Box 22000 St Louis, MO 63126	\$ 5,500